## \*21700000000000000000000

WYO-217 (8/08)			LO#:			
			Ado	dress Change		
			F	Fact-Finding		
Name:				SSN:	BYE:	
1.	Old Address:			_		
	City:					
	State;					
	Zip:					
	Phone:					
2.	New Address:	:				
	City:					
	State:					
	Zip:					
	Phone:					
	If	you are curre	ently on unemplo	yment, please answer	the questions below:	
3.	Date(s) of Act	of Actual Move:				
4.	What days we	ere you <u>NOT</u> av	vailable for work	during the week you m	oved?	
	Monday	Tuesday	Wednesday	Thursday		
	Friday	Saturday	Sunday			
5.	How could a potential employer have contacted you during the week?					
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6.		If work had been offered while moving, would you have accepted it? Yes No				
	A. If no, why not?					
7.	List the emplo	yers you conta	acted during the v	veek of your move:		
	Employer Na	ame	Date	Method of Contact	Results	
		The	above foots one t	mus to the heat of my lan	oviladas	
		ıne	above facts are t	rue to the best of my kr	owieuge.	
C1	aimant's Sionati	ire.		De	ite:	
<b>C10</b>	Claimant's Signature:			Date:		